FUEST " 4EZZEDO

Application Data Sheet

Application Information

Application number::	
Filing Date::	11/29/01
Application Type::	Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: METHODS AND COMPOSITIONS FOR

CULTURING A BIOLOGICAL TOOTH

Attorney Docket Number:: 10498-00031

Request for Early Publication?:: NO

Request for Non-Publication?:: NO

Suggested Drawing Figure::

Total Drawing Sheets:: 11

Small Entity?:: YES

Latin name::

Variety denomination name::

Petition included?:: NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: NO

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Pamela

Middle Name:: C.

Family Name:: Yelick

Name Suffix::

City of Residence:: Concord

State or Province of Residence:: MA

Country of Residence:: US

Street of mailing address:: 118 Laws Brook Road

City of mailing address:: Concord

State or Province of mailing address:: MA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 02174

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: John

Middle Name:: D.

Family Name:: Bartlett

Name Suffix::

City of Residence:: Acton

State or Province of Residence:: MA

Country of Residence:: US

Street of mailing address:: 6 Captain Browns Lane

City of mailing address:: Acton

State or Province of mailing address:: MA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 01720

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Joseph

Middle Name:: P.

Family Name:: Vacanti

Name Suffix::

City of Residence:: Winchester

State or Province of Residence:: MA

Country of Residence:: US

Street of mailing address:: 14 Woodside Road

City of mailing address:: Winchester

State or Province of mailing address:: MA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 01890

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Bjorn

Middle Name:: R.

Family Name:: Olsen

Name Suffix::

City of Residence:: Milton

State or Province of Residence:: MA

Country of Residence:: US

Street of mailing address:: 1053 Brush Hill Road

City of mailing address:: Milton

State or Province of mailing address:: MA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 02186

Applicant Authority Type::	Inventor
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Country of Residence::

US

Correspondence Information

Correspondence Customer Number:: 22910

Representative Information

Representative Customer Number:: 22910

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/253,891	11/29/00

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: President and Fellows of Harvard College

Street of mailing address:: 17 Quincy Street

City of mailing address:: Cambridge

State or Province of mailing address:: MA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 02138